



# CENTRAL PRINTING REQUISITION

PLEASE ATTACH A SAMPLE • INDICATE ANY CHANGES NEEDED • DO NOT STAPLE ORIGINALS!

DATE SUBMITTED:	DATE NEEDED:	RUSH JOB <input type="checkbox"/>	RUSH JOBS MAY BE SUBJECT TO ADDITIONAL CHARGES	JOB# 000000
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DEPARTMENT INFO:					
DEPARTMENT/DIVISION:			CONTACT PERSON:	PHONE#:	
DELIVERY LOCATION:			STOP #:	FAX #:	
FUND:	ORG:	CORNERSTONE:	PROJECT:	ACTIVITY:	ACCOUNT:
AUTHORIZED SIGNATURE:					DATE:

JOB INFO:					
QUANTITY NEEDED:	JOB NAME/DESCRIPTION:				
NUMBER OF ORIGINALS:	SIZE:	PAPER TYPE:	PAPER COLOR:	<input type="checkbox"/> HARDCOPY <input type="checkbox"/> EXACT REPEAT <input type="checkbox"/> DIGITAL FILE <input type="checkbox"/> REVISED ARTWORK	
<b>PRINT:</b> <input type="checkbox"/> BLACK PRINTS <input type="checkbox"/> COLOR PRINTS <input type="checkbox"/> ONE SIDED <input type="checkbox"/> TWO SIDED <input type="checkbox"/> TURN ➡ <input type="checkbox"/> TUMBLE ⬇ <input type="checkbox"/> SLIP SHEET SETS	<b>BINDERY:</b> <input type="checkbox"/> STAPLE TOP CORNER <input type="checkbox"/> STAPLE BIND <input type="checkbox"/> SADDLE STITCH <input type="checkbox"/> TAPE BIND <input type="checkbox"/> COMB BIND  <b>COVERS:</b> <input type="checkbox"/> FRONT COVER <input type="checkbox"/> CLEAR <input type="checkbox"/> CARDSTOCK <input type="checkbox"/> BACK COVER <input type="checkbox"/> CARDSTOCK	<b>FOLDING:</b> <input type="checkbox"/> HALF FOLD <input type="checkbox"/> TRI-FOLD (BROCHURE) <input type="checkbox"/> Z-FOLD (STATEMENT) <input type="checkbox"/> ENGINEER FOLD <input type="checkbox"/> FOLD & TAB SEAL (SELF-MAILERS)  <b>HOLE PUNCH:</b> <input type="checkbox"/> 2-HOLE <input type="checkbox"/> 3-HOLE <input type="checkbox"/> CUSTOM: _____ <input type="checkbox"/> TOP <input type="checkbox"/> LEFT SIDE	<b>PADS:</b> SHEETS PER PAD: _____  <input type="checkbox"/> WRAPAROUND COVERS  <b>LARGE FORMAT:</b> SIZE: _____  <input type="checkbox"/> MOUNT ON FOAM <input type="checkbox"/> LAMINATE	<b>NCR (CARBONLESS)</b> <input type="checkbox"/> 2-PART (W/C) <input type="checkbox"/> 2-PART (W/P) <input type="checkbox"/> 3-PART (W/C/P) <input type="checkbox"/> 4-PART (W/C/P/G) <input type="checkbox"/> 5-PART (W/G/C/P/G)  <b>GRAPHICS:</b> <input type="checkbox"/> SCAN TO PDF <input type="checkbox"/> MAKE FORM <input type="checkbox"/> VARIABLE DATA <input type="checkbox"/> REVISIONS <input type="checkbox"/> NEW DESIGN	<b>DEPT. STATIONERY:</b> <input type="checkbox"/> BUSINESS CARDS <input type="checkbox"/> 100 <input type="checkbox"/> 250 <input type="checkbox"/> 500 <input type="checkbox"/> LETTERHEAD <input type="checkbox"/> 100 <input type="checkbox"/> 500 <input type="checkbox"/> 1000 <input type="checkbox"/> ENVELOPES <input type="checkbox"/> 500 <input type="checkbox"/> 1000 <input type="checkbox"/> 2500
<b>LAMINATE:</b> <input type="checkbox"/> FLUSH CUT <input type="checkbox"/> 1/8" OVERLAP <input type="checkbox"/> MOUNT ON FOAM					
<b>SPECIAL INSTRUCTIONS:</b>					

CENTRAL PRINTING USE ONLY:		
<b>PROOFS:</b> TO DEPARTMENT: _____ APPROVED: _____ BY: _____	<b>IMPRESSIONS:</b> <input type="checkbox"/> IR7105 <input type="checkbox"/> C6000 BLACK: _____ \$ _____ COLOR: _____ \$ _____	TIME COST
<b>PAPER STOCK:</b> VENDOR: _____ COST: _____	<b>BINDERY:</b> <input type="checkbox"/> TAPE <input type="checkbox"/> COMB SIZE: _____ COLOR: _____ QTY: _____ COST: _____	COLLATE: _____ FOLDING: _____ STAPLE: _____ DRILL: _____ CUT: _____ PAD: _____ GRAPHICS: _____ PAPER: _____ OTHER: _____
<b>VENDOR:</b> NAME: _____ JOB#: _____ JOB COST: _____	<b>JOB COMPLETE:</b> _____ _____	<b>TOTAL JOB COST :</b> _____
<b>VENDOR:</b> NAME: _____ JOB#: _____ JOB COST: _____		